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ABSTRACT

Advocacy for child development programs is discussed in this document. Advocacy for child development programs is described as having two main components: (1) convincing the general public of the importance of early childhood development; and (2) persuading lawmakers to allocate funds needed to do the job well. Ten guidelines for effective advocacy are given: (1) be informed; (2) be specific; (3) have a plan; (4) be honest; (5) form advocacy networks; (6) be flexible; (7) be dramatic; (8) be nice; (9) be confident; and (10) be diligent. Suggested readings on the topic of child advocacy are listed. The document concludes with a recommendation that all early childhood professionals be in contact with child advocacy organizations and need to use their resources in developing their own strategy. (Author/ABL)

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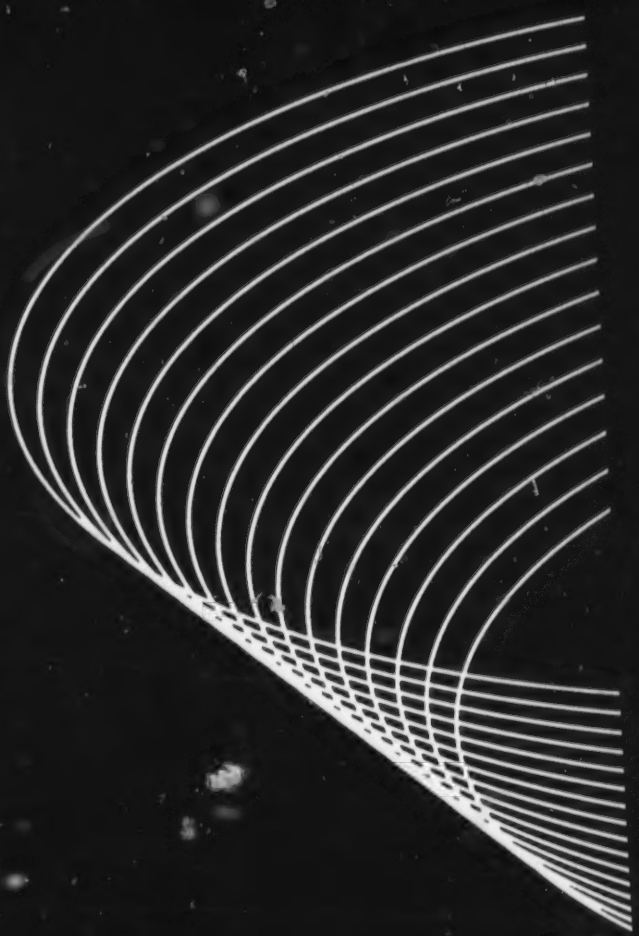

SPEAKING UP

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SPEAKING UP

Some Guidelines for Improving Advocacy Skills

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Foreword

"One that pleads the cause of another."[1]—an advocate.

It sounds easy enough. "Yes, I am angry at the system. And I am furious with the inflexibility of the existing structure. Can't anyone else see how few the dollars are and how great the need is? Change just doesn't happen fast enough to meet the needs of this individual who so desperately needs help."

Such emotions are at the very core of what makes people become advocates. But these emotions can also undermine the advocacy efforts of the most committed persons. In the following adapted presentation, Dr. Bettye Caldwell, professor of Child Psychology at the University of Arkansas, presents some very baseline but very sage advice for those who so desperately want change—many times for those whom they most love. And although her remarks were made to a group of professionals concerned with infant mental health, we believe that her suggestions apply to all those who advocate on behalf of those in need. And if we can become more effective advocates, we only increase the chance that the system will indeed change, the structure will become more flexible, the dollars will increase, and our loved ones will get help.

Marion Tolbert Coleman
Executive Associate
Hogg Foundation

[1]*Webster's Ninth New Collegiate Dictionary*. Springfield, MA: Merriam-Webster, Inc. 1988.

Whether work in child development involves mainly teaching, administration, research, clinical work, or some combination of these activities, some time and energy should be devoted to advocacy. That is, everyone involved needs to make some contribution to the tasks of generating funds to support the work and to raising public consciousness about both the importance of the early years in development and the advocates' role in the process. These efforts make high quality early childhood programs and their availability to all children who need them an emerging reality rather than a dream.

What is Advocacy?

Words creep into everyday vocabularies without anyone's really thinking about their meaning. Just what is advocacy, anyway? The dictionary defines it as the act or process of being an advocate. And the word "advocate" can be a synonym for attorney, or patron, or supporter, or champion. Engaging in advocacy for young children is to work to defend the field, to help it hold its own in the continuing struggle to obtain a fair share of public resources. And there are at least two aspects to that struggle: (1) convincing the general public of the importance of early child development and (2) persuading lawmakers—local, state, and national—to allocate the funds needed to do the job well.

These two functions of advocacy are of equal importance. Unless public consciousness is raised about the value of early childhood programs, little hope exists for influencing the public's representatives who write and pass the legislation. Every time people talk about this work to groups at churches or at service club luncheons, they are functioning as advocates for children and families. And every time a letter is written to the local newspaper or an article is prepared for the popular press, someone is engaged in advocacy. Such articles do not

count for a great deal on the promotion and tenure ladder, but they have potential for more positive benefits to the cause of children than the articles which appear in print only in professional journals.

The second function is the one most readily associated with advocacy: efforts to influence legislation. It is this aspect of advocacy work to which most of the guidelines offered here pertain directly. And it is this aspect about which people are usually timid and uncertain. State capitols are big and cold, and the marble floor is hard on one's feet. The reception may be discouraging—while the advocate is talking, the legislator is looking around to see who else is present and may not make eye contact. The message that comes through is, "Talk fast, for I've got a lot of other things to do." Telephone calls may not make it past an answering service. And letters (which have great value) sometimes generate only a form letter in response. And yet, though these initial efforts can be overwhelming, they are essential. Like everything else, they become easier with practice.

Training for Advocacy

In spite of the need for advocacy, most people have little or no training in how to go about it. Like beginning swimmers being thrown into the pool, inexperienced advocates may feel they are being challenged to swim or drown.

It is possible, though, to organize advocacy efforts on the basis of principles which will help ensure success. It is important to make certain that, in so far as possible, the techniques will help and not hinder efforts. This booklet contains ten suggestions which can facilitate advocacy efforts. They are very commonsensical and down-to-earth—but so is advocacy. Each reader will be able to add others which fit an individual advocacy style.

Guidelines for Effective Advocacy

1. Be informed. This is a cardinal principle. The advocate must know his or her facts. No surer way exists to defeat advocacy efforts than not knowing the subject matter thoroughly. Jokes are made about the presumed IQ's of some state legislators, but they can be a sharp group. It is courting disaster to go in to speak before a legislative committee about the need for more child care for infants, for example, without having the facts. Some typical questions might be, "Just how many infants are we talking about? What kinds of services do they have now? What are other states doing along these lines? Are there any private services available? What can we expect from the programs you want to see in operation?" Not having done the homework is an invitation to be ridiculed or, even worse, totally ignored.

One implication of this advocacy principle is that better data are needed concerning programs for young children and families. A demographic statistic often quoted now is that slightly more than half of children under the age of one year spend some time in child care. About two-thirds of toddlers do, and about three-fourths of children in the 3-5 year range do. Now those percentages catch attention, but the impact will be much greater if the percentages can be translated into actual numbers for the nation, for the state, for the city.

In spite of all the efforts, and in spite of the research done by many organizations, data on service utilization and service needs are poor. The ten-year census points leave big gaps in the figures. And, in recent years, the rate of change has been so rapid that is is difficult to project future rates from earlier points on the curve.

2. Be specific. It is important to know what is needed and exactly what is being requested. Is that request for appropria-

tion of funds to offer child care in three local high schools for the children of teen-age mothers? Then it is vital to say just that—not forgetting the number "three"—rather than advocating vaguely to "help these teen-age mothers." Are the funds to support consultation from mental health professionals who can work with child care personnel? Are they for more training for parenthood programs in the high schools as a preventive measure? Will they back an anti-drug program added to prenatal clinics? Will they provide for five new well-child clinics established in target areas with programs of training and support for parents included as a regular part of the service? Old clichés like "I want people to be happy" or "I want to minimize suffering" don't work any more.

Generalities should be avoided. "We've got to reverse priorities and put children first" or "we're not a child-oriented society" may be effective in-house; they stir us up to more advocacy. But saying that to legislators might bring an unwelcome response like, "Look there, we just passed a $400-million dollar education bill, and the bond issue that would have helped build a factory in my home district failed. Don't tell me we didn't put children first." Broad and general accusatory statements imply that the person being addressed is not on our side and that she or he has not been doing anything to help young children. Making a specific request, requiring finite resources, implies, "I know you have worked hard for young children in the past, and here is a way you can help further."

3. **Have a plan.** The development of a plan of action is an essential component of any marketing strategy, and advocacy is clearly related to marketing. Goals must be articulated and steps identified toward that goal that will represent acceptable progress within a given time frame. Specific information is needed about what the acceptable increments of progress will be. Success should be broken down into small pieces; everything cannot be achieved in one giant step for mankind.

Again, an example from infant day care will provide a good illustration. When Dr. Julius Richmond and I established the Children's Center in Syracuse, New York in 1964, we wanted to develop an "ideal" center. However, there were no standards to go by, as not a single state in the union licensed day care for children under age three at the time. In developing a program, all we could do was to try to concretize major theoretical principles of good child development and put them into practice in our center.

Yet there should have been at least heuristic standards, as even then one-fourth of children under three had working mothers. Every good child advocate knew that those children were being cared for somewhere, but by not allowing the service to be licensed, people could pretend that it wasn't happening.

That sort of "ostriching" of an advocacy issue is actually the worst possible way to deal with it. Some of the resistance came from people who, without knowing what they meant, wanted the service to be "perfect." There was a general phobia that one could not sanction or endorse anything that might not be perfect for infants. Of course, the alternative was not to guarantee that other perfect arrangements would be available—the alternative was that there would be no monitoring of what was being used. Then somehow, to the consternation of those who were most concerned, this message was interpreted by the general public in quite a different way. Many seemed to conclude that, since it apparently wasn't important enough for the state to set some regulations, then just about anything would be okay. It took a long time to break out of that mentality.

This is a good example of the need to *identify acceptable increments of progress in any advocacy field*. These specified increments are a vital part of any advocacy plan. To refer again to child care, national standards would likely be in place today if, when Federal Interagency Day Care Requirements were first proposed, there had been willingness to think in terms of

acceptable increments of progress. Unwillingness to do this will often defeat an entire effort.

Perhaps this identification of acceptable increments is but another way of compromising. In advocacy, a compromise is often better than total failure. And we may have to negotiate to get anything at all. Getting something started is an opportunity to foster growth and development. Without a start, nothing progresses.

4. Be honest. Perhaps a better phrase to describe this principle would be "avoid hyperbole." (I chose "be honest" because, like every good early childhood person, I wanted to state my ideas positively rather than negatively.) The word "hyperbole" doesn't get much use, but its abbreviation—hype—does. Hype means exaggeration. Extravagant claims. Promising too much. In advocacy efforts, the natural sequel to oversell is overkill.

An excellent example comes from the history of the Head Start program. The early promotion of Head Start was full of hyperbole, not only in terms of what would be accomplished (wonders!) but also in terms of characteristics of the children to be served (abysmal!). These young children of poverty were described as depressed, as totally unaware of their surroundings, as never having had a toy or seen a book, and as possibly not even knowing their own names. Obviously *some* of these descriptors characterized *some* of the potential Head Start children. But the claims represented hype nonetheless. As did the implication that what was originally only a 6- or 8-week summer program could cure all those ills! Within a year of the hyperbole, the field of early childhood development was suffering from failure to live up to the hype. Only the gradual accumulation of painstaking longitudinal studies, identifying the reasonable but extremely valuable advantages associated with Head Start (and other quality early childhood programs), saved the cause.

In this context, it is necessary to be aware of the need to devote efforts to advocacy for research. Advocacy is thought of as pertaining almost exclusively to services. But services are built upon the knowledge base. If the knowledge base does not grow, services cannot improve. And good research, like quality service, is not cheap. The more that this is known about what works and doesn't work, the better advocates can be persuasive in arguments for service development or expansion.

5. Form advocacy networks. Advocates and their organizations are not the only ones concerned about quality programs for young children and their families. A lot of other people out there are concerned about the same thing, even though they might be marching under a different banner. To be sure, sometimes they may see the available pie as too small to give everyone a slice. The funding of services by categories leads to this sort of competitiveness—if early childhood programs get the money, services for learning disabled and emotionally disturbed will suffer. It is crucial that this kind of trap be avoided by working cooperatively with other groups concerned with similar if not identical problems.

The common goal of these groups is prevention. The sorts of preventive services which reduce one type of problem will also be effective in helping to reduce others. And quality early childhood programs are undoubtedly the best preventive service available for any sort of end-point category. Awareness of this can facilitate better collaboration between and among organizations with similar but not identical advocacy agendas.

6. Be flexible. If an advocacy plan is not successful, evaluation of the problems can lead to development of an alternative strategy. The point made earlier about acceptable increments of progress and the necessity for negotiation is also relevant here. Sometimes compromise is called for while supporters

regroup, rethink, reformulate. It is not inconceivable that the plan of action was not an effective one. Frequently it is necessary to come up with a new plan. Maintaining flexibility will make this possible.

7. **Be dramatic.** People who are effective advocates all have something in common: they have style, elan, a flair for the dramatic. Perhaps not too many people can remember a dramatic bit of advocacy of some 25 years ago. Dr. Ben Spock, at that time the world's most closely followed pediatrician, took out (and paid for) a full page ad in the *New York Times* communicating his opposition to the Vietnam war. The ad did not contain a long list of professional colleagues who were opposed to the war. Rather it carried a picture of Dr. Spock with a worried look on his face and carried the simple message: "Dr. Spock is worried about America's children." In small print it went on to say that he was worried because of the implications of the Vietnam situation. But the simple caption to the powerful picture was high drama. And while it may not have always evoked a positive response, it did catch the attention of every reader in the world who saw that ad.

Drama and creativity are important in advocacy efforts. In the area of infant services one can easily do this and still not violate Principle #4 above (Be honest). The development of the human infant is the most dramatic event in the world, and the importance of helping to create a supportive family environment in which the baby can learn to love and trust people and to enjoy and conquer the world is the most dramatic message anyone can ever try to communicate.

Dr. T. Berry Brazelton's television sessions with an infant communicate his message with drama and passion as well as sincerity and honesty. He makes the drama come alive for everyone. He helps viewers and listeners to realize that, without success in the drama of child development, there can be little or no hope for world peace, a clean environment,

honesty and integrity in business, and an over-arching spirituality which allows transcendance of the limits of self-hood.

And the drama can play everywhere; that is, it works on the road. It can be played in New Haven and Peoria and Waco as well as on Broadway. It can appear in the *Ladies Home Journal* and *Working Mother* as well as in *Child Development*. And, actually, the first two may be more important than the last.

In this recommendation, it should be obvious that television is included. Television is where the audience is, and that is where the message will reach them. Again, Dr. Brazelton has helped give status to the drama of infant development by his willingness to stake his professional reputation on the importance of seemingly humble events of daily life. In our macho culture, for a grown man to hold up a baby and coo and smile in its face and talk a modified version of baby talk takes courage, but it's incredibly effective. Those who have seen him in this role will know why one of the fundamental principles of effective advocacy is: be dramatic.

8. Be nice. Perhaps this sounds too humble to be considered a principle of effective advocacy. But, humble or otherwise, it is valid. There is nothing less effective than an aggressive, threatening advocate. "Boy, if you don't vote for this, you'll never be re-elected." Or, "How can you be so stupid as not to realize the importance of what I'm saying?" There is never a substitute for common courtesy.

Appearances of self-serving must be tempered, too. People should advocate as citizens, not as members of organizations. It is all too easy for a legislator to interpret efforts as attempts to provide more jobs for a particular professional field or better salary for the advocates themselves, etc. There is a fine line between advocacy and lobbying. Knowing the difference is critical.

9. Be confident. In order to be truly effective, advocates have to believe that their actions will make a difference. Lack of conviction will show in the approach to people in behalf of the cause.

Today many young people seem to be less optimistic that they can make a difference. "It's too late to save the forests, so we can cut down as many trees we want to." "The clean water is all gone." "There are just too many abused and neglected children for us to be able to help." "There is no way to break the welfare cycle."

Well, there is certainly no way to accomplish these things without trying. And if each of us doesn't have a strong belief in the probability of achievement, trying won't do much good. Here is where the above-mentioned process of breaking success down into small steps will help. Keeping in mind only the final goal will establish a wide gap between beginning and end, and in that chasm discouragement can grind everyone down. But if plans and energies can be organized for step-wise progression, it is possible to keep belief alive in the face of temporary failure.

10. Be diligent. The original designation for this principle was simply: work hard. And perhaps that is still the best way to express the intention. Several words such as dedicated, committed, and persistent seemed to carry the same meaning. But the definition of diligent came closer to the recommendation: steady, earnest, and energetic application and effort. That's what it takes to wake up the American public about services for young children and families. Working steadily, earnestly, energetically.

I learned this lesson many years ago when engaged in my first advocacy activities in the state of Missouri. At the time I was the director of a small service for retarded children and their parents at Washington University Medical School called the Child Evaluation Clinic. The clinic had come into being

largely through the diligent advocacy efforts of one man—Mr. Frank Ackerman, a retired businessman with a Downs Syndrome adult son. Mr. Ackerman took me with him to Jefferson City where, for the first time, at age 29, I spoke to a group of legislators about the development of children. Only one of the two pieces of legislation for which we were working passed—mandatory classes for educably retarded children. The legislation for trainables did not pass. Mr. Akerman accepted this with aplomb, interpreting passage of the one bill as an acceptable increment of success, not defeat of the second as failure. I went back to St. Louis somewhat discouraged, but he stayed there, lingering in the gallery to make certain he knew how the various legislators voted. When he returned to St. Louis, he called me immediately, asked me to get out my calendar, then said, "When can we meet to start planning what to do in the next session?" That is diligence. And that is what effective advocacy requires.

I encountered the same sort of diligence in one of the better-known heroes of childhood development programs some years ago. In a speech at the Arkansas Association on Children Under Six, Dr. James L. Hymes, Jr., long a leader in early childhood education, made the point that he never let a week go by without writing to his congressman and to both of his senators. He did this, he added, even when there was no specific piece of legislation for which he was working. "I just want them to know I'm paying attention to what they do." What a marvelous philosophy! And what dedicated and diligent advocacy.

Commentary

Additional recommendations could be made. Things like: Don't get discouraged. Be succinct; never use a paragraph where a sentence would do. Keep your sense of humor. Be careful or cautious. Be competitive—fight for the cause you believe in. Be courageous. Let your voice tremble and shake, but speak your piece. Be humble; it's just possible that you could be slightly wrong in some of the things you are advocating. Be willing to learn. And certainly I should not omit: be joyful. There is nothing in the world more gratifying than working for a cause you believe in. Find the joy in it, and soar.

Although there has not been a great deal written to help us develop advocacy skills, there are a number of publications with useful guidelines (see the Suggested Readings at the end of this text.) And major professional organizations (Southern Association on Children Under Six, National Association for the Education of Young Children, the Children's Defense Fund, and the Child Care Action Campaign) not only have publications which can help but also will respond to telephone requests for facts to use in presentations or procedures to follow in developing a systematic plan of action. All early childhood professionals need to be in contact with these organizations and use their resources in developing their own strategy. For advocacy is a serious business, and it needs to be done well and done right.

Suggested Readings

Caldwell, Bettye M. (1987). Advocacy is everybody's business. *Child Care Information Exchange*. *54*. 29-32

Children's Defense Fund. (1979). *It's time to stand up for your children: A parent's guide to child advocacy*. Washington, D.C.: Children's Defense Fund.

Goffin, Stacey G. & Lombardi, Joan. (1988). *Speaking out: Early childhood advocacy*. Washington, D.C.: National Association for the Education of Young Children.

Wilkins, A. & Blank, Helen. (1986). Child care: Strategies to move the issue forward. *Young Children*. *42*. 68-72

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